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Bib Data Sheet

CONFIRMATION NO. 6373

SERIAL NUMBER 10/824,143	FILING OR 371(c) DATE 04/14/2004 RULE	CLASS 250	GROUP ART UNIT 2881	ATTORNEY DOCKET NO. 72063
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APPLICANTS

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** CONTINUING DATA *****None*****

** FOREIGN APPLICATIONS *****None*****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 06/23/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 7	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <u>Zia R. Hashemi</u> Examiner's Signature	<u>W</u> Initials			

ADDRESS

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TITLE

Sterilizer for small items used by babies and children

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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